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SUBJECT: Public Health in Fujian Province: Dealing with Disease

REF: Guangzhou 628

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11. (SBU) Summary. Drawing on lessons learned from the 2003 SARS outbreak, public health officials in Fujian worked to establish a comprehensive emergency response and alert system for communicable diseases. The current H1N1 outbreak has highlighted the limitations of the system and a need to improve the institutional capacity to manage health emergencies. Influenza and hepatitis remain the most common types of contagious disease in Fujian, but the spread of HIV to new segments of the population (seniors and youth) is of concern to public health officials. Two Fujian cities have abnormally high cancer rates. Economic growth and improved living standards have created heightened public expectations regarding health care. End summary.

Developing an Emergency Response System

12. (U) Fujian province was hit badly by the outbreak of SARS in 12003. Caught largely unprepared, public health officials resolved to establish a comprehensive emergency response and alert system. According to Fujian Center for Disease Control (CDC) officials, a total of 13 different contingency plans were adopted since 2003 to guide the province's response to the spread of infectious diseases within the general population. More than 260 disease monitoring stations were established at hospitals and clinics province-wide. This network monitors communities throughout the province on a 24-hour basis. Since 2007, an additional 1,000 monitoring points were established in rural areas.

13. (U) According to public health officials, Fujian's public health organizations and hospitals regularly conduct drills and exercises so that public health officials and medical personnel are familiar with the protocols for dealing with infectious diseases. The province also provided funding to upper level medical institutions and hospitals so that they could improve their capacity to respond to pandemic and contagious diseases. Fujian also established an infectious diseases information center within the Fujian CDC. To

minimize the possibility of disease transmission through its blood supply, Fujian banned the commercial collection of blood products. At present, all blood products in Fujian's blood banks are collected from volunteers and inspected by local blood centers before being transferred to local hospitals.

¶4. (SBU) During 2009, the spread of the H1N1 virus has tested Fujian's emergency response and alert system. While the system effectively provided early alerts and an organized, systematic method of dealing with H1N1 cases--with certain hospitals in each area of the province designated to treat H1N1 cases--the system has had less success in preventing or slowing the spread of H1N1 infection.

Dealing with the H1N1 Virus

¶5. (SBU) Officials from Fujian's CDC equivalent say that Fujian residents returning to Fujian from North America prior to August of 2009 were responsible for the first wave of H1N1 outbreaks. The third H1N1 case diagnosed in China was found in Fujian. Officials say 99% of the cases found in Fujian during the first 2 months originated in the United States. After August, however, most of the new H1N1 cases originated locally. To deal with the H1N1 outbreak, Fujian designated 21 hospitals and established more than 10 laboratories to deal with the virus. Every district in Fujian has a clinic that can test for H1N1. Currently, almost all of the H1N1 cases diagnosed in Fujian are attributed to local transmission.

¶6. (U) Because of the widespread nature of H1N1 infection, hospitals and clinics now are not required to report H1N1 cases unless they develop into severe cases or result in death. Mass outbreaks have been reported in several Fujian schools during the past several weeks. As a result, schools throughout Fujian take

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temperature scans of students before they are allowed to attend classes. Still, Fujian officials claim that the number of H1N1 cases in Fujian remains lower than the national average. They say that in Fujian, an estimated 38% of flu patients are infected with H1N1, while the remaining 62% are infected with the seasonal flu. This compares to an estimated 80% H1N1 infection rate for flu patients in Guangdong province.

Other Contagious Diseases and Diseases of Concern

¶7. (U) According to Fujian public health officials, influenza and hepatitis are the two most common types of contagious disease in Fujian and the biggest burdens on the public health care system. Fujian CDC officials say 28 different types of infectious diseases have been found in Fujian. The diseases, grouped into three categories, are as follows: A) plague and cholera; B) hepatitis, dysentery, typhoid, HIV, gonorrhea, syphilis, poliomyelitis, measles, pertussis, diphtheria, epidemic cerebrospinal meningitis, scarlet fever, hemorrhagic fever, rabies, leptospirosis, brucellosis, anthrax, typhus, encephalitis, leishmaniasis, malaria, and dengue; C) tuberculosis, schistosomiasis, filariasis, echinococcus, influenza, leprosy, mumps, rubella, neonatal tetanus, acute hemorrhagic conjunctivitis, and other types of diarrhea. Officials note that the following infectious diseases have been eliminated (with year eradicated in Fujian noted in parenthesis): plague (1953), schistosomiasis (1987), malaria (1992), polio (1995), and filariasis (2008).

¶8. (U) Corresponding to the province's economic growth and prosperity, officials have discerned a noticeable trend away from diseases of "poverty" to diseases of "affluence." They note that Fujian is currently witnessing significantly higher rates of heart disease, high blood pressure, diabetes, and near-sightedness. Demographic factors influencing the types of diseases found in Fujian also include the province's aging population and steady trend towards urbanization.

HIV/AIDS in Fujian

¶9. (U) According to the Fujian Health Department, the number of identified HIV/AIDS cases in Fujian increased from 1952 cases in 2008 to 2409 cases in 2009. In addition, 176 Fujian residents living in other provinces in China have been identified as HIV carriers. Broken down by sex, there are 1.9 HIV/AIDS cases involving males for every case involving a female. The Health Department's statistics indicate that as of October 31, 2009 there have been 477 deaths attributed to AIDS in Fujian. Most of the province's HIV/AIDS cases come from Fuzhou, Quanzhou, and Xiamen, with Fuzhou having the largest number of known HIV/AIDS cases. In releasing the 2009 report on HIV/AIDS, public health officials expressed special concern over the growth in infection rates among youth and senior citizens. In 2009, 20% of the newly reported cases involved persons over 50 in age; 5% of the new cases involved adolescents under age 20. According to data gathered by the Health Department, 67.3% of those newly infected acquired the virus through heterosexual contacts, while 7.8% were attributed to homosexual contacts. Sharing needles among drug users accounted for 6.1% of the new infections.

¶10. (U) To help stem the spread of HIV among drug users, Fujian has established 15 special clinics that provide methadone-type medications. These clinics served an estimated 5,800 patients with drug addictions in 2009. HIV/AIDS education campaigns have been extended to Fujian's rural areas. In 2008, 3.8 million brochures and posters were produced and distributed to local residents. Health authorities have implemented national plans relating to providing HIV/AIDS medications to qualified individuals. In 2008, 308 patients received free medications. In addition, authorities have established a central HIV laboratory that is linked with eleven satellite laboratories throughout the province. In addition, 197 HIV monitoring posts have been established through the province to provide information to the Fujian CDC. Two cities in Fujian--Changle and Jinjiang--have been identified as national

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experimental comprehensive assistance zones for dealing with HIV/AIDS cases. Social welfare assistance programs in these cities, manned by social workers and counselors, help HIV/AIDS patients find jobs and return to normal schedules.

Fujian Cities with Elevated Cancer Rates

¶11. (U) Fujian Public Health Department officials say that, in general, the average incidence rate of cancer in Fujian is roughly comparable to the rest of the world. Liver cancer, gastric cancer, lung cancer, and cancers of the esophagus and colon are the most common varieties found in Fujian. However, higher than normal rates of gastric cancer have been found in Fuzhou's Changle township; abnormally high rates of liver cancer have been uncovered in Xiamen's Tong'an District. According to researchers, the gastric cancer in Changle (death rate of 93 per 100,000 people) may be connected with contamination from sources including helicobacter pylori, fungi, nitrites and the uneven distribution of minerals. Researchers believe that some of these contaminants come from preserved foods, including fish juice, which are traditionally consumed by Changle area residents. Researchers have said Tong'an's abnormally high cancer rates may stem from industrial water pollution problems or from aflatoxin found in peanuts consumed in the Tong'an area.

Economic Progress Brings Heightened Expectations

¶12. (SBU) Fujian public health officials note that the province's rapid rate of economic development and improvement in standard of living over the past several decades have created heightened public expectations regarding medical standards and health care. In addition to pressure for wider access and better health insurance coverage (see reftel), the heightened expectations also extend to effectively monitoring and treating communicable diseases. In this regard, Fujian officials acknowledged a particular need to strengthen their ability to manage public health emergencies and contingency response plans. Officials say that in addition to

taking steps to strengthen institutional capacity--especially as it relates to extending medical care to rural areas, more must be done to improve the level of health-related education provided to the public. They noted that H1N1-related public health education programs directed at children highlighting the need to wash hands represented a small step in the right direction. One official noted that when it comes to educational outreach, it has generally been more effective to teach children and then let the children teach their parents.

¶13. (SBU) Comment: At the start of the H1N1 outbreak, Fujian officials used the outbreak as a reason for keeping consulate officers out of Fujian universities, explaining that public gatherings at the schools were restricted. More recently, even as mass outbreaks were reported in some Fujian schools, this restrictive policy was eased and consulate officers were allowed to speak to sizeable groups of students at several universities. Public health officials, it seems, are now less "panicked" about the spread of H1N1 and less inclined to view foreigners as the agents of infection. End comment.

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